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RURAL DISTRICT COUNCIL OF
NORTON.

Annual Report

OF THE

Medical Officer of Health.

FOR THE YEAR 1941.

NORTON RURAL DISTRICT COUNCIL.

To the Chairman and Members of the Public Health Committee.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to submit the report on the health of the district for the year 1941.

STATISTICS and SOCIAL CONDITIONS of the AREA.

Area (in acres) 92,279.

Population (estimated 1941) - 7,997.

Population (1939) - 7,882.

Number of inhabited houses - 2,034.

Rateable Value £19,975.

Product of penny rate £82 14s. 11d.

The area is wholly agricultural, and there is no other industry. There is no evidence of unemployment, and the standard of living would appear to have improved.

VITAL STATISTICS.

Extracts from Vital Statistics provided by the Registrar-General.

		Total	M.	F.	
Live Births	Legitimate	112	63	49	} Birth rate per 1,000 population 15·25
	Illegitimate	10	4	6	
	Total	122	67	55	
Still Births		4	2	2	} Rate per 1000 Births 32.
Deaths		97	47	50	} Rate per 1,000 population 12·1

These figures compare favourably with those for the whole of England and Wales, which are :

Birth Rate 14·2
Death rate 12·9

Deaths from puerperal causes - Nil.

Death Rate of Infants under one year of age :

All infants per 1,000 live births - 56.

Legitimate per 1,000 live births - 44.

Illegitimate per 1,000 live births - 200.

Rate for England and Wales - 59.

Deaths from Cancer	...	12.
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Deaths from Measles	...	Nil.
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Deaths from Whooping Cough	...	Nil.
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Deaths from Diarrhoea (under 2)	...	Nil.
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There is no feature of unusual interest about these statistics.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

Public Health Officers of the Authority.

Medical Officer of Health, August to December, 1941,
W. THISTLETHWAITE, M.B., Ch.B., (part-time Officer).

Sanitary Inspector, O. MILBURN, Cert. S.I B., M.S.I.A.,
Cert. Meat Inspector.

Medical Officer of Health, January to July, 1941,
Dr. L. C. WALKER, M.A., M.B., B.Ch. M.R.C.S., L.R.C.P.

Nursing.

There are two nurses resident in the area :

M. Curl, S.R.N., S.C.M., Ganton.

I. L. G. Walters. S.R.N., S.C.M., Langton.

Working with the Ganton & District Nursing Association and
the Westow & District Nursing Association respectively.

In addition

Nurse F. V. Fish, S.C.M., S.R.N., Norton and
Nurse V. Hunt, S.C.M., Burton Fleming
who are County Midwives residing outside the Norton Rural
District, attend midwifery cases in the area.

There are no County Midwives residing in the Norton Rural
District, which is a large and scattered area, but grants are made
by the County Council to the two nursing associations, which
are also supported by local endeavour.

There is a marked need for more provision being made, both
for general and midwifery nursing.

Medical relief. The condition of needy pensioners has been
to some extent improved by the granting of supplementary
pensions, and those in receipt of such supplements become
automatically entitled to medical treatment.

Laboratory facilities.

Ample use of laboratory investigations is made for :—

Diagnosis of infectious disease.

Routine periodic examination of water samples from
each village.

Examination of milk supplies

The E.M.S. Laboratory, Pocklington, The North Riding
Laboratory, Scarborough, The Clinical Research Association,
London, have all carried out investigations, and material for
diphtheria immunisation has been provided by the E.M.S.
Laboratory.

Ambulance facilities.

Civilian. None in the area.

Use is made, in need, of the Cloughton Ambulance for
transportation to Scarborough and the Malton Ambulance for
transport thereto.

A.R.P.

One Ambulance is stationed at Rillington, three in the
Norton Urban District are available at need, and others in the
area are noted and co-ordinated. Cars are also available and
earmarked for sitting cases. These services have been adequate
in the past and are considered adequate in the event of emer-
gency.

Nursing in the Home.

There is none other than that provided by the two local and limited nursing associations. These provide treatment for the aged and needy without remuneration.

Treatment Centres.

An Infant Welfare Clinic is held every four weeks at Sherburn.

Hospitals.

There are none in the area.

Hostels for evacuated children and for evacuated mothers are adequate.

Infectious diseases are treated at the Isolation Hospital at Driffild, from where an ambulance is sent when required. Isolation Hospitals for evacuated children at Stamford Bridge, Malton and Norton are available and are made use of.

Clinics.

Tuberculosis. Every four weeks at Norton.

Orthopædic. Scarborough. Malton and Driffild—Every four weeks.

Venereal Disease. Scarborough and York—Four sessions each week.

Housing.

There has been no housing development by the Local Authority or by private enterprise, during the year. There is still a considerable need for new houses in the area, which must be met in the future.

The need created by the movement of population has been largely met by the utilisation of unoccupied houses in clearance areas, as a temporary expedient.

Inspection and Supervision of Food.

Milk Supply. Many inspections and analyses have been carried out to ensure a satisfactory milk supply for children attending the schools in the villages.

The Report of the Sanitary Inspector is appended.

Number of Inspections—845.

Number of Notices Served—

Statutory 1

Informal 8

Informal notices complied with—8.

New drains and repairs—18.

Structural alterations—6.

Meat and Food.

Visits to licensed slaughter houses— 214. The following were condemned :

96 pounds of offal.

640 eggs.

24 pounds of cheese

18 pounds of margarine

12 pounds of tea.

PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASE.

Disease.	Total Cases.	Admitted to Hospital.	Deaths
Paratyphoid	1	1	1
Scarlet Fever	13	13	0
Whooping Cough	18	3	0
Diphtheria	3	3	0
Measles	97	5	0

Measles and whooping cough were very prevalent during the year, mostly amongst the native, as opposed to the evacuated children, who appeared already to have acquired an immunity.

Active immunisation was extensively urged and carried out chiefly in the primary schools, but also at the clinic and in private practice.

Alum precipitated toxoid was used, an initial dose of 0.1cc. followed after four weeks by 0.3cc.

TUBERCULOSIS. NEW CASES AND MORTALITY.

Age	NEW CASES				DEATHS.			
	Resp.		Non. Resp.		Resp.		Non. Resp.	
	M.	F.	M.	F.	M.	F.	M.	F.
21	1							
18		1						
35		1						
20		1						
45		1						
35		1						
6				1	1	2	1	

I have the honour to be,

Ladies and Gentlemen,

Your obedient Servant,

W. THISTLETHWAITE,

Medical Officer of Health.

